Fill in this information to identify your case:						
Debtor 1	Theodoros Koliatsis					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF CALIFORNIA			
Case number	19-30003					
(if known)						

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	2,000,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	16,593.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,016,593.00
Par	2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,296,658.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	232,682.00
	Your total liabilities	\$	1,529,340.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	17,853.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	16,270.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other s	chedules.
7	Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com Case: 19-30003 Doc# 19 Filed: 01/16/19 Entered: 01/16/19 12:10:57 Page 1 of 23 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

16,000.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Doc# 19 Filed: 01/16/19 Entered: 01/16/19 12:10:57

	nation to identify your case and	this filin	g:				
Debtor 1	Theodoros Koliatsis First Name Midd	dle Name		Last Name			
Debtor 2							
(Spouse, if filing)		dle Name		Last Name			
United States Bar	nkruptcy Court for the: NORTHE	RN DIST	RICT O	F CALIFORNIA			
Case number _1	9-30003						☐ Check if this is an amended filing
Official Fo	rm 106A/B						
Schedule	e A/B: Property						12/15
information. If more Answer every quest Part 1: Describe E	Each Residence, Building, Land, or Cave any legal or equitable interest in	sheet to t	his form	On the top of any additional page			
Yes. Where is	the property?						
1.1 3931 Gear	y Blvd.	Wha		roperty? Check all that apply -family home	Do not deduc	ct secured cla	ims or exemptions. Put
Street address, if	f available, or other description			c or multi-unit building minium or cooperative			d claims on Schedule D: ns Secured by Property.
Can Franci	inna CA 04440,0000			actured or mobile home	Current valu		Current value of the
San Franc	isco CA 94118-0000 State ZIP Code	_		ment property	entire prope	rty? 0,000.00	portion you own? \$2,000,000.00
S.i.y	5.00	=					
			Other	Mixed commercial use	_ (such as fee	simple, ten	our ownership interest ancy by the entireties, or
				interest in the property? Check one	a life estate)	, if known.	
San Franc	isco		Debtor Debtor				
County			Debtor	1 and Debtor 2 only	□ Check i	f this is com	munity property
		C		st one of the debtors and another	(see instri	uctions)	
				ation you wish to add about this it ntification number:	em, such as loca	31	
	ar value of the portion you own t ave attached for Part 1. Write tha					>	\$2,000,000.00
Part 2: Describe	Your Vehicles						
	e, or have legal or equitable inte es. If you lease a vehicle, also rep						chicles you own that
3. Cars, vans, tru	icks, tractors, sport utility vehic	les, mot	orcycles	s			
■ No							
ΠYes							

Official Form 106A/B Schedule A/B: Property page 1

Debtor	1 Theodoros K	oliatsis Case number (if known)	19-30003
		or homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
■ No)		
□Ye	es		
5 444	the dellar value of	the parties you own for all of your entries from Bart 2, including any entries for	
		the portion you own for all of your entries from Part 2, including any entries for d for Part 2. Write that number here=>	\$0.00
		nal and Household Items gal or equitable interest in any of the following items?	Current value of the
·	·		portion you own? Do not deduct secured claims or exemptions.
	sehold goods and fu	urnishings bes, furniture, linens, china, kitchenware	
ПΝ			
Y	es. Describe		
		Household furnishings	\$200.00
		<u> </u>	<u> </u>
7. Elect Exai	mples: Televisions an	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music phones, cameras, media players, games	collections; electronic devices
□ N			
■ Y	es. Describe		
		TV, cell phone	\$300.00
Exai	other collectio	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coir ns, memorabilia, collectibles	n, or baseball card collections;
■ N	o es. Describe		
	musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	o es. Describe		
10. Fire			
		, shotguns, ammunition, and related equipment	
□ N			
■ Y	es. Describe		
		Guns	\$2,000.00
		-	
11. Clo <i>Exa</i>	<i>amples:</i> Everyday clo	thes, furs, leather coats, designer wear, shoes, accessories	
Y	es. Describe		
		Clothing	\$300.00
12. Jew		velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	and silver

☐ No

■ Yes. Describe.....

Official Form 106A/B Schedule A/B: Property page 2 Best Case Bankruptcy

Case: 19-30003 Doc# 19 Filed: 01/16/19 Entered: 01/16/19 12:10:57 Page 4 of 23

Debtor 1	Theodoros K	oliatsi	5	C	ase number (if known)	19-30003
		Rings				\$200.00
		J				
<i>Exam</i> ■ No	arm animals nples: Dogs, cats, b . Describe	irds, ho	rses			
14. Any o	ther personal and	house	hold items you did not a	Iready list, including any health aid	ds you did not list	
■ No					-	
⊔ Yes	. Give specific info	rmation			ŗ	
				including any entries for pages yo	ou have attached	\$3,000.00
Part 4: D	escribe Your Financ	ial Asset	s			
Do you o	wn or have any le	gal or e	quitable interest in any o	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No		•	our wallet, in your home, i	n a safe deposit box, and on hand wl	nen you file your petitio	on
					Cash	\$200.00
<i>Exam</i> □ No		f you ha		certificates of deposit; shares in creative same institution, list each. Institution name: Wells Fargo Business checking account xxx8264:\$200 Business checking account r\$189 Personal savings account no	no. no. xxx1846:	ouses, and other similar
	s, mutual funds, o nples: Bond funds, i			ge firms, money market accounts		
			Institution or issuer name	:		
joint ■ No	venture	rmation	interests in incorporated about them	d and unincorporated businesses,	including an interes % of ownership:	t in an LLC, partnership, and
Nego Non-i ■ No	tiable instruments i negotiable instrume	rate bor nclude p ents are	nds and other negotiable personal checks, cashiers' those you cannot transfer	e and non-negotiable instruments checks, promissory notes, and mon to someone by signing or delivering	ey orders.	
☐ Yes	. Give specific infor		about them uer name:			

Official Form 106A/B Schedule A/B: Property page 3

De	epror i neodoro	os Koliatsis	Case	10111bei (if known) 19-30003
21.	_ '		403(b), thrift savings accounts, or other pension	or profit-sharing plans
	■ No □ Yes. List each acc	count separately. Type of account:	Institution name:	
22.		and prepayments sused deposits you have made s	so that you may continue service or use from a co t, public utilities (electric, gas, water), telecommu	
	■ No □ Yes		Institution name or individual:	
23.	_ `	ct for a periodic payment of mor	ney to you, either for life or for a number of years)
	■ No □ Yes	Issuer name and description.		
24.	26 U.S.C. §§ 530(b)(cation IRA, in an account in a (1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified	state tuition program.
	■ No □ Yes	Institution name and description	on. Separately file the records of any interests.11	U.S.C. § 521(c):
25.	Trusts, equitable o ■ No	r future interests in property (other than anything listed in line 1), and right	s or powers exercisable for your benefit
		c information about them		
26.			and other intellectual property eeds from royalties and licensing agreements	
		c information about them		
27.		es, and other general intangib permits, exclusive licenses, coc	oles operative association holdings, liquor licenses, pr	rofessional licenses
	☐ Yes. Give specific	c information about them		
M	oney or property ow	ed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed	to you		
	■ No □ Yes. Give specific	information about them, includi	ng whether you already filed the returns and the	tax years
29.	_ '	e or lump sum alimony, spousal	support, child support, maintenance, divorce set	tlement, property settlement
	■ No □ Yes. Give specific	information		
			ments, disability benefits, sick pay, vacation pay, neone else	workers' compensation, Social Security
	☐ Yes. Give specific	c information		
31.	Interests in insurar Examples: Health, o		th savings account (HSA); credit, homeowner's, c	or renter's insurance
		surance company of each policy Company name:	and list its value. Beneficiary:	Surrender or refund
				value:

Official Form 106A/B Schedule A/B: Property page 4

Debt	or 1 Theodoros I	Koliatsis	Case number (if known)	19-30003
: :	Any interest in proper If you are the beneficia someone has died. I No I Yes. Give specific inf	ty that is due you from someone who has died ry of a living trust, expect proceeds from a life insurance policionmation	icy, or are currently entitled to reco	eive property because
		arties, whether or not you have filed a lawsuit or made a employment disputes, insurance claims, or rights to sue	a demand for payment	
	Other contingent and No No Yes. Describe each o	unliquidated claims of every nature, including countercl	laims of the debtor and rights to	set off claims
	any financial assets yo l No l Yes. Give specific inf	ou did not already list		
36.		of all of your entries from Part 4, including any entries for number here		\$593.00
Part !	5: Describe Any Busine	ess-Related Property You Own or Have an Interest In. List any re	eal estate in Part 1.	
	o you own or have any lo No. Go to Part 6. Yes. Go to line 38.	egal or equitable interest in any business-related property?		Current value of the portion you own? Do not deduct secured claims or exemptions.
39. C	No Yes. Describe Office equipment, furn	or commissions you already earned nishings, and supplies lated computers, software, modems, printers, copiers, fax m	nachines, rugs, telephones, desks,	
		Computers and printers		\$300.00
	Machinery, fixtures, ed No Yes. Describe	quipment, supplies you use in business, and tools of yo	ur trade	
		Refrigerators, old registers		\$700.00
	nventory I No I Yes. Describe			
		Dairy products, fruits and vegetables		\$12,000.00

Official Form 106A/B Schedule A/B: Property page 5

Deb	tor 1	Theodoros Koliatsis		Case number (if known)	19-30003			
42. I	42. Interests in partnerships or joint ventures							
	No							
] Yes.	Give specific information about them Name of entity:		% of ownership:				
	Custon No.	ner lists, mailing lists, or other compilations						
	Do you	ır lists include personally identifiable information (as defined in 1	1 U.S.C. § 101(41A))?					
		No						
	_	■ No ☑ Yes. Describe						
	Any bu I _{No}	siness-related property you did not already list						
		Give specific information						
				r				
45.		he dollar value of all of your entries from Part 5, including rt 5. Write that number here				\$13,000.00		
Part		scribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	et In.				
46 T	a van	own or have any legal or equitable interest in any farm-	or commercial fishin	ig-related property?				
		Go to Part 7.		g related property.				
	_	Go to line 47.						
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above					
		have other property of any kind you did not already list?	•					
	<i>Examp</i> I No	les: Season tickets, country club membership						
		Give specific information						
		·		Γ				
54.	Add t	he dollar value of all of your entries from Part 7. Write tha	at number here			\$0.00		
Part 8: List the Totals of Each Part of this Form								
55.	Part 1	: Total real estate, line 2				52,000,000.00		
56.	Part 2	: Total vehicles, line 5	\$0.00					
57.		: Total personal and household items, line 15	\$3,000.00					
58.		: Total financial assets, line 36	\$593.00					
59.		: Total business-related property, line 45	\$13,000.00					
60.		: Total farm- and fishing-related property, line 52	\$0.00					
61.	Part 7	: Total other property not listed, line 54 +	\$0.00					
62.	Total	personal property. Add lines 56 through 61	\$16,593.00	Copy personal property to	otal	\$16,593.00		
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$2 ,	016,593.00		

Official Form 106A/B Schedule A/B: Property page 6

Fill in this inform	mation to identify your	case:		
Debtor 1	Theodoros Koliat	tsis		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF CALIFORNIA	
	19-30003			
(if known)				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exem	pt
---	----

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	3931 Geary Blvd. San Francisco, CA 94118 San Francisco County	\$2,000,000.00	-	\$75,000.00	C.C.P. § 704.730			
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit				
	Household furnishings Line from Schedule A/B: 6.1	\$200.00		\$200.00	C.C.P. § 704.020			
	Line Irom Scriedule AVB. 6.1			100% of fair market value, up to any applicable statutory limit				
	TV, cell phone Line from Schedule A/B: 7.1	\$300.00		\$300.00	C.C.P. § 704.020			
	Line Holli Schedule A.B. 1.1			100% of fair market value, up to any applicable statutory limit				
	Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	C.C.P. § 704.020			
	Line Holli Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit				
	Rings Line from Schedule A/B: 12.1	\$200.00		\$200.00	C.C.P. § 704.040			
	Line nom Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Deptoi	Theodoros Kollatsis		Case number (ii	19-30003
	ief description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	im Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exempti	tion.
	omputers and printers ne from Schedule A/B: 39.1	\$300.00	\$300	0.00 C.C.P. § 704.060
			☐ 100% of fair market value, t any applicable statutory lim	•
	efrigerators, old registers	\$700.00	■ \$700	0.00 C.C.P. § 704.060
Ε.	ie iieiii Gonedale 702. 10 .1		☐ 100% of fair market value, to any applicable statutory limit	•
	re you claiming a homestead exemption ubject to adjustment on 4/01/19 and every No			ljustment.)
	Yes. Did you acquire the property cover	ed by the exemption wi	hin 1,215 days before you filed this	nis case?
	□ No			
	☐ Yes			

Fill in this information to identify yo	ur case:			
Debtor 1 Theodoros Kol	iatsis			
First Name	Middle Name Last N	ame	_	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last N	ame	_	
	e: NORTHERN DISTRICT OF CALIFOR	NIIA		
United States Bankruptcy Court for the	NORTHERN DISTRICT OF CALIFOR	INIA	_	
Case number				
(if known)				if this is an
			amend	led filing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Sec	ured by Proper	ty	12/15
	If two married people are filing together, both			
is needed, copy the Additional Page, fill it number (if known).	out, number the entries, and attach it to this f	orm. On the top of any addition	onal pages, write your na	me and case
1. Do any creditors have claims secured b	by your property?			
☐ No. Check this box and submit	this form to the court with your other schedu	ules. You have nothing else	to report on this form.	
■ Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor se	Column A	Column B	Column C
for each claim. If more than one creditor ha	is a particular claim, list the other creditors in Part	2. As Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabe	tical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Casco Financial, Inc.	Describe the property that secures the clair	n: \$582,658.00	\$2,000,000.00	\$0.00
Creditor's Name	3931 Geary Blvd. San Francisco, 0 94118 San Francisco County	CA		
15700 Winchester Blvd.	As of the date you file, the claim is: Check all	that		
Los Gatos, CA 95030	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	An agreement you made (such as mortgag	e or secured		
Debtor 2 only	car loan) —			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit	and of Tours		
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Deed of Trust		
Date debt was incurred 2017	Last 4 digits of account number	2102		
<u> 2011</u>				
2.2 San Francisco County Tax Collector	Describe the property that secures the clair	n: \$12,000.00	\$2,000,000.00	\$0.00
Creditor's Name	3931 Geary Blvd. San Francisco, G	CA		
	94118 San Francisco County			
P.O. Box 7426	As of the date you file, the claim is: Check all	that		
San Francisco, CA 94120	apply. □ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgag	e or secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
☐ Check if this claim relates to a community debt	_	erty taxes		
Date debt was incurred	Last 4 digits of account number			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Best Case Bankruptcy

Debtor 1 Theodoros Koliatsis		Case number (if known)	19-30003	
First Name Middle N	lame Last Name			
2.3 Wells Fargo Bank, N.A.	Describe the property that secures the claim:	\$702,000.00	\$2,000,000.00	\$0.00
Creditor's Name	3931 Geary Blvd. San Francisco, CA 94118 San Francisco County			
794 Davis Street San Leandro, CA 94577	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
riambor, earest, etc., etc. a z.p eeae	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien			
At least one of the debtors and another	☐ Judgment lien from a lawsuit)		
☐ Check if this claim relates to a community debt	5	d of Trust		
Date debt was incurred 2005	Last 4 digits of account number 140	03		
Add the dollar value of your entries in C If this is the last page of your form, add Write that number here: Part 2: List Others to Be Notified for		\$1,296,658 \$1,296,658		
trying to collect from you for a debt you o	oe notified about your bankruptcy for a debt that owe to someone else, list the creditor in Part 1, ar It you listed in Part 1, list the additional creditors his page.	nd then list the collection ag	ency here. Similarly, if you h	ave more
Name, Number, Street, City, State & John Castellano	Zip Code On	which line in Part 1 did you en	ter the creditor? 2.1	
c/o Casco Financial, Inc.	Las	t 4 digits of account number _	_	
15700 Winchester Blvd. Los Gatos, CA 95030				
Name, Number, Street, City, State &	Zip Code On	which line in Part 1 did you en	ter the creditor? 2.3	
W.T. Capital Lender Servic	es	•		
7522 North Colonial Avenu CA 93711-5865	e, Suite 101 Las	t 4 digits of account number _	_	
Name, Number, Street, City, State &	Zip Code On	which line in Part 1 did you en	ter the creditor? 2.3	
Wells Fargo Bank, N.A.	G.II			
c/o Steven B. Mains	Las	t 4 digits of account number _	_	
Mains & Bloom, PC 267 Locust Avenue, Suite	Δ			
San Rafael, CA 94901-2240				

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com Case: 19-30003 Doc# 19 Filed: 01/16/19 Entered: 01/16/19 12:10:57

Fill in this inf	formation to identify your ca	ase:	
Debtor 1	Theodoros Koliats	is	
	First Name	Middle Name Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name	
(Spouse II, IIIIIIg)	i list Name	Wildle Name Last Name	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF CALIFORNIA	
Case number	19-30003		
(if known)	10-0000		☐ Check if this is an
			amended filing
Schedule		no Have Unsecured Claims	12/15
iny executory of Schedule G: Ex- Schedule D: Cre eft. Attach the (name and case	contracts or unexpired leases the ecutory Contracts and Unexpired editors Who Have Claims Secu	Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPR nat could result in a claim. Also list executory contracts on Schedule A/B: Project Leases (Official Form 106G). Do not include any creditors with partially secred by Property. If more space is needed, copy the Part you need, fill it out, nur. If you have no information to report in a Part, do not file that Part. On the top ecured Claims	perty (Official Form 106A/B) and on ured claims that are listed in mber the entries in the boxes on the
1. Do any cre	ditors have priority unsecured	claims against you?	
■ No. Go	to Part 2.		
□Yes			
	t All of Your NONPRIORITY	Unsecured Claims	
Yes. 4. List all of yunsecured	our nonpriority unsecured claiclaim, list the creditor separately	t. Submit this form to the court with your other schedules. ms in the alphabetical order of the creditor who holds each claim. If a creditor hor each claim. For each claim listed, identify what type of claim it is. Do not list claim: the other creditors in Part 3.If you have more than three nonpriority unsecured claim.	s already included in Part 1. If more
Part 2.	, ,		Total claim
Δttor	rney General of the Unite	ed	
4.1 State	=	Last 4 digits of account number	\$0.00
	iority Creditor's Name		
	ntion: Chief tax Division	When was the debt incurred?	
	Trial Section, Western F Golden Gate Ave	egion	
	Francisco, CA 94102		
	er Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who in	ncurred the debt? Check one.		
Del	btor 1 only	☐ Contingent	
☐ Del	btor 2 only	☐ Unliquidated	
☐ Del	btor 1 and Debtor 2 only	Disputed	
☐ At I	least one of the debtors and anot	Type of NONPRIORITY unsecured claim:	
☐ Ch	eck if this claim is for a comm	unity	
debt		☐ Obligations arising out of a separation agreement or divorce that y	you did not
	claim subject to offset?	report as priority claims	
■ No		☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	s	Other. Specify	

Official Form 106 E/F

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Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 4

Best Case Bankruptcy

4.2	CA Dept. of Tax and Fee Administration	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name P.O. Box 942789	When was the debt incurred?	
	Sacramento, CA 94279 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	CA Employment Development Dept.	Last 4 digits of account number 3024	\$55,000.00
	Nonpriority Creditor's Name Bankruptcy Group MIC 92E P.O. Box 826880	When was the debt incurred?	
	Sacramento, CA 94280-0001		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	
4.4	Franchise Tax Board Nonpriority Creditor's Name	Last 4 digits of account number	\$177,682.00
	Special Procedures Bankruptcy Unit	When was the debt incurred?	
	P.O. Box 2952 Sacramento, CA 95812-2952 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	Debtor 1 only	Пол	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Income Tax Arrears	

Official Form 106 E/F

Case: 19-30003

Debtor 1 Theodoros Koliatsis

Theodoros Koliatsis	Case number (if known) 19-30003	
Franchise Tax Board	Last 4 digits of account number	\$0
Nonpriority Creditor's Name Special Procedures Bankruptcy Unit	When was the debt incurred?	
P.O. Box 2952 Sacramento, CA 95812-2952		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Internal Revenue Service	Last 4 digits of account number	\$(
Nonpriority Creditor's Name P.O. Box 7346 Philodolphia PA 40404 7346	When was the debt incurred?	
Philadelphia, PA 19101-7346 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
Yes	Other. Specify	
Lars T. Fuller, Esq. Nonpriority Creditor's Name	Last 4 digits of account number	\$(
The Fuller Law Firm 60 N. Keeble Ave.	When was the debt incurred?	
San Jose, CA 95126-2723	_	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only	По и	
_ ,	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
io tilo olullii gubiloot to Uliget i	report de priority oldino	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	

Official Form 106 E/F

Name and Address

EDD Bay Area Collection Office 7677 Oakport St. #400 Oakland, CA 94621

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 232,682.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 232,682.00

Official Form 106 E/F

Fill in this infor	rmation to identify your	case:			
Debtor 1	Theodoros Koliat	sis			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF CALIFORNIA		
Case number	19-30003				
(if known)	10-0000			_	Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					_
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	0.1.)		<u> </u>	2 0040	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	0.1,		<u> </u>	2 0040	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	- City		Ciaio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Official Form 106G

Case numbrositif known) Official Schedu Codebtors a beople are fill it out, an	es Bankruptcy Court for the: er 19-30003 Form 106H ule H: Your Code are people or entities who ar filling together, both are equa	Middle Name Middle Name NORTHERN DISTRICT	Last Name Last Name T OF CALIFORNIA		☐ Check if this is an amended filing
(Spouse if, filing United State Case numb (if known) Official Schedu Codebtors a people are f ill it out, an	es Bankruptcy Court for the: er 19-30003 Form 106H ule H: Your Code are people or entities who ar filling together, both are equa	NORTHERN DISTRICT			
Case numbrif known) Official Codebtors are fell it out, an	Form 106H ule H: Your Code are people or entities who are filing together, both are equa		OF CALIFORNIA		
Official Schedu	Form 106H ule H: Your Code are people or entities who are filing together, both are equals	ebtors			
Official Schedu	ule H: Your Cod are people or entities who ar filing together, both are equa	ebtors			
Sodebtors a people are fill it out, an	ule H: Your Cod are people or entities who ar filing together, both are equa	ebtors			ŭ
Codebtors a eople are fill it out, an	are people or entities who a filing together, both are equa	ebtors			
eople are f ill it out, an	filing together, both are equa				12/15
	and case number (if known) ou have any codebtors? (If y	. Answer every questior	1.		, ,
■ No					
☐ Yes					
	in the last 8 years, have you a, California, Idaho, Louisiana,				states and territories include
	Go to line 3. Did your spouse, former spou	ıse, or legal equivalent liv	e with you at the time?		
in line 2 Form 1	2 again as a codebtor only it	f that person is a guarar	ntor or cosigner. Make	sure you have listed the	with you. List the person show e creditor on Schedule D (Officia Schedule E/F, or Schedule G to f
_	Column 1: Your codebtor ame, Number, Street, City, State and ZI	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				□ Schedule D, line	
N	Jame			☐ Schedule E/F, lir ☐ Schedule G, line	
	lumber Street City	State	ZIP Code	_	
				☐ Schedule D, line	1
3.2				□ Schedule E/F, lir	
	lame			☐ Schedule G, line	

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Schedule H: Your Codebtors

							_				
	in this information to ide										
De	btor 1 Th	eodoros l	Koliatsis			—					
l	btor 2					_					
Un	ited States Bankruptcy C	Court for the	: NORTHERN DISTRIC	T OF CALIFORNIA							
_	se number 19-3000	03					☐ An		nt showing	g postpetition ollowing date:	chapter
0	fficial Form 10	<u>)61</u>					M	M / DD/ Y	YYY		
S	chedule I: Yo	ur Inc	ome								12/15
sup spo atta	plying correct informat use. If you are separate	tion. If you ed and you this form.	sible. If two married peo are married and not filii ir spouse is not filing wi On the top of any additi	ng jointly, and your th you, do not inclu	spouse ide infor	is liv mati	ing with y on about y	ou, incluyour spo	ide inforn use. If mo	nation about ore space is	your needed,
1.	Fill in your employme	ent		Debtor 1				Debtor 2	or non-fil	ling spouse	
	If you have more than	one job,	Employment status	■ Employed	■ Employed			☐ Employed			
	information about addi	attach a separate page with information about additional		☐ Not employed				☐ Not er	nployed		
	employers.		Occupation	Self-employed							
	Include part-time, seas self-employed work.	sonal, or	Employer's name	4th and Geary F	armer'	s Ma	arket				
	Occupation may include or homemaker, if it app		Employer's address	3931 Geary Blv San Francisco,		18					
			How long employed to	nere? 16 year	rs			_			
Pai	rt 2: Give Details	About Mor	nthly Income								
	imate monthly income a use unless you are sepa		ate you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	lude your no	n-filing
	ou or your non-filing spou e space, attach a separa		ore than one employer, co	embine the informatio	n for all	empl	oyers for th	hat persor	n on the lir	nes below. If	you need
							For Debt	tor 1		otor 2 or ng spouse	
2.			ry, and commissions (becalculate what the monthl		2.	\$		0.00	\$	N/A	
3.	Estimate and list mor	nthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inco	me. Add lir	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

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				For	Debtor 1		Debtor 2 or -filing spouse
	Сору	line 4 here	4.	\$	0.00	\$	N/A
5.	List a	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	17,853.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	0.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	17,853.00	\$	N/A
10.	Calcı	ulate monthly income. Add line 7 + line 9.	10. \$	1	7,853.00 + \$		N/A = \$ 17,853.00
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			7,000.00		17,000.00
11.	State Include other	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depend				chedule J. 11. +\$ 0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 17,853.00
							Combined monthly income
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.	?				
		Yes. Explain:					

Fill	in this information to identify your case:					
Deb	Debtor 1 Theodoros Koliatsis			Check if this is:		
	otor 2 ouse, if filing)			An amended filing A supplement show 13 expenses as of	ving postpetition chapter	
	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF CALIFORN	ΙΙΔ		MM / DD / YYYY		
				WIWI / DD / TTTT		
	nown) 19-30003					
0	fficial Form 106J					
S	chedule J: Your Expenses				12/15	
info nui	as complete and accurate as possible. If two married people are filinormation. If more space is needed, attach another sheet to this form. mber (if known). Answer every question.					
1.	t 1: Describe Your Household Is this a joint case?					
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?					
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for S</i>	eparate Househo	old of De	btor 2.		
2.	Do you have dependents? ■ No					
		pendent's relation btor 1 or Debtor 2		Dependent's age	Does dependent live with you?	
	Do not state the				□ No	
	dependents names.				☐ Yes ☐ No	
					⊔ No □ Yes	
					□ No	
					☐ Yes	
					□ No	
					☐ Yes	
3.	Do your expenses include No					
	expenses of people other than yourself and your dependents?					
	t 2: Estimate Your Ongoing Monthly Expenses					
exp	timate your expenses as of your bankruptcy filing date unless you ar benses as of a date after the bankruptcy is filed. If this is a suppleme plicable date.	e using this for ntal <i>Schedule J</i>	m as a s , check	upplement in a Cha the box at the top o	opter 13 case to report f the form and fill in the	
the	lude expenses paid for with non-cash government assistance if you value of such assistance and have included it on <i>Schedule I: Your I</i> fficial Form 106I.)			Your expe	enses	
	· ·					
4.	The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.	e first mortgage	4.	\$	6,160.00	
	If not included in line 4:					
	4a. Real estate taxes		4a.	\$	0.00	
	4b. Property, homeowner's, or renter's insurance		4b.	· ———	360.00	
	4c. Home maintenance, repair, and upkeep expenses		4c.		0.00	
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home ed 	ruity loans	4d. 5.	·	0.00 4,250.00	
Ο.	Additional mortgage payments for your residence, such as nome et	1aity iodila	٥.	Ψ	4,200.00	

Official Form 106J

page 1

6 6 6 7. F 8. C 9. C	Itilities: a. Electricity, heat, natural gas b. Water, sewer, garbage collection c. Telephone, cell phone, Internet, satellite, and cable services	6a. 6b.	\$	
66 67. F 73. C 90. C	b. Water, sewer, garbage collectionc. Telephone, cell phone, Internet, satellite, and cable services		\$	
6 7. F 8. C 9. C	c. Telephone, cell phone, Internet, satellite, and cable services	6h	*	2,000.00
7. F 3. C 9. C			*	125.00
7. F 3. C 9. C		6c.	\$	400.00
3. c 9. c 10. f	d. Other. Specify:	6d.	\$	0.00
). (ood and housekeeping supplies	7.	\$	400.00
10. F	childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	300.00
4 B	Personal care products and services	10.	\$	300.00
1. N	ledical and dental expenses	11.	\$	50.00
	ransportation. Include gas, maintenance, bus or train fare. To not include car payments.	12.	\$	850.00
	intertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	haritable contributions and religious donations	14.	\$	10.00
	nsurance.			
	o not include insurance deducted from your pay or included in lines 4 or 20.	45.	•	
	5a. Life insurance	15a.	·	0.00
	5b. Health insurance	15b.	·	560.00
	5c. Vehicle insurance	15c.	•	355.00
	5d. Other insurance. Specify:	15d.	\$	0.00
5	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	0.00
	nstallment or lease payments: 7a. Car payments for Vehicle 1	17a.	¢	0.00
	7b. Car payments for Vehicle 2	17a. 17b.	·	0.00
	• •		•	0.00
	7c. Other. Specify:	17c. 17d.	·	0.00
	· · · · <u></u>	1/u.	Φ	0.00
	our payments of alimony, maintenance, and support that you did not report as leducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.		
	Other real property expenses not included in lines 4 or 5 of this form or on Sche			• • •
	0a. Mortgages on other property	20a.	·	0.00
	0b. Real estate taxes	20b.	·	0.00
	0c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	0d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
_	0e. Homeowner's association or condominium dues	20e.		0.00
I. (Other: Specify: Vermin remediation supplies	21.	+\$	100.00
	Calculate your monthly expenses			
	2a. Add lines 4 through 21.		\$	16,270.00
2	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	16,270.00
	Calculate your monthly net income.		_	
	3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	17,853.00
2	3b. Copy your monthly expenses from line 22c above.	23b.	-\$	16,270.00
2	3c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	1,583.00
F n	Or you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your nodification to the terms of your mortgage? No.			ease or decrease because of a
	Yes. Explain here:			

Official Form 106J page 2

Debtor 1	Theodoros Koliat				
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF CALIFORNIA		
Case number	19-30003				
if known)				☐ Check if the	าis is an
				amended	filina

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Di	id you pay or agree to pay someone who is NOT an attor	ney to help you fill out bankruptcy forms?
	N o	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have read the sum at they are true and correct. /s/ Theodoros Koliatsis	mary and schedules filed with this declaration and
	Theodoros Koliatsis Signature of Debtor 1	Signature of Debtor 2
	Date January 16, 2019	Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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